

**BEST AVAILABLE COPY**

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001				Application or Docket Number STL 10261 09981123		
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE OR OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS 18		NUMBER FILED NUMBER EXTRA		RATE FEE BASIC FEE 370.00 OR BASIC FEE 740.00 X\$ 9= <input type="checkbox"/> X42= <input type="checkbox"/> +140= <input type="checkbox"/> TOTAL <input type="checkbox"/>		
FOR		NUMBER FILED NUMBER EXTRA		RATE FEE X\$ 18= <input type="checkbox"/> X84= <input type="checkbox"/> +280= <input type="checkbox"/> OR TOTAL <input type="checkbox"/>		
TOTAL CHARGEABLE CLAIMS 18 minus 20 = <input type="checkbox"/>						
INDEPENDENT CLAIMS 3 minus 3 = <input type="checkbox"/>						
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>						
* If the difference in column 1 is less than zero, enter "0" in column 2						
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)				SMALL ENTITY OR OTHER THAN OR SMALL ENTITY		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT Total: 18 Independent: 3		HIGHEST NUMBER PREVIOUSLY PAID FOR Minus: 20 Minus: 3		RATE ADDI- TIONAL FEE X\$ 9= <input type="checkbox"/> X42= <input type="checkbox"/> +140= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				RATE ADDI- TIONAL FEE X\$18= <input type="checkbox"/> X84= <input type="checkbox"/> +280= <input type="checkbox"/> OR TOTAL ADDIT. FEE <input type="checkbox"/>	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT Total: 17 Independent: 3		HIGHEST NUMBER PREVIOUSLY PAID FOR Minus: 20 Minus: 3		RATE ADDI- TIONAL FEE X\$ 9= <input type="checkbox"/> X42= <input type="checkbox"/> +140= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				RATE ADDI- TIONAL FEE X\$18= <input type="checkbox"/> X84= <input type="checkbox"/> +280= <input type="checkbox"/> OR TOTAL ADDIT. FEE <input type="checkbox"/>	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT Total: <input type="checkbox"/> Independent: <input type="checkbox"/>		HIGHEST NUMBER PREVIOUSLY PAID FOR Minus: <input type="checkbox"/> Minus: <input type="checkbox"/>		RATE ADDI- TIONAL FEE X\$ 9= <input type="checkbox"/> X42= <input type="checkbox"/> +140= <input type="checkbox"/> TOTAL ADDIT. FEE <input type="checkbox"/>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				RATE ADDI- TIONAL FEE X\$18= <input type="checkbox"/> X84= <input type="checkbox"/> +280= <input type="checkbox"/> OR TOTAL ADDIT. FEE <input type="checkbox"/>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.						